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GLORIA MOLINA, MARK RIDLEY-THOMAS URGE CONTINGENCY PLAN FOR 150 MORE BEDS AT LAC-USC

LAC-USC ER Overcrowded 80% of Time Since New Hospital Opened

LOS ANGELES (July 6, 2010)—Los Angeles County Board of Supervisors Chair Gloria Molina and Sup. Mark Ridley-Thomas urged their colleagues today to prepare a contingency plan adding 150 medical-surge beds to the LAC-USC Medical Center in case the need for inpatient beds at the hospital is still high even after national health care reform is fully implemented. A vote on their proposal is expected at next week's board meeting and comes on the heels of a report released earlier this month by HDR Architecture on overcrowding and excessive wait times at the county-run LAC-USC, Harbor-UCLA, and Olive View Medical Centers.

"The report confirms what our Department of Health Services has told the Board of Supervisors every other week since the new hospital opened—that the LAC-USC Medical Center is too small," said Molina. "The numbers prove it. We continually have a deficit of available inpatient beds—and these conditions put a perpetual strain on our emergency department. The only unknown variable is national health care reform. Ideally, it will reduce the number of patients using our emergency rooms and hospital beds. But it might not. And if it does not, we need to be prepared—especially since L.A. County will always be the safety net provider for those individuals who cannot or will not seek care elsewhere. Last month, LAC-USC's emergency room was overcrowded 80 percent of the time, with conditions considered severe or dangerous for half of the month. This has been the situation since the hospital opened. Hopefully, health care reform will be the solution to these problems—but we should prepare in case it is not."

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“It is critical that L.A. County build and maintain a strong infrastructure to support the health, emergency, and trauma needs of its residents,” said Ridley-Thomas. “The ‘right size’ of LAC-USC hospital is unfinished business and is a critical piece of the larger safety net puzzle.”

Molina’s and Ridley-Thomas’ proposal—to be voted on next week—would direct the Department of Health Services (DHS), the Department of Public Works (DPW), and the Chief Executive Office (CEO) to report to the Board of Supervisors in 90 days with a construction plan that includes cost estimates and funding sources; a timeline for plan design, engineering, and construction; recommendations for possible locations; and an analysis of licensing, staffing, and other related requirements.

The proposal also directs DHS and the CEO to report back in 90 days with projections for how many uninsured DHS patients are likely to obtain insurance per year between now and 2014—and the effect that this is likely to have on demand for inpatient beds at the LAC-USC Medical Center as well as other county hospitals so the county can measure whether demand for inpatient beds is decreasing as national health care reform is implemented. Analysis must take into account any potential increases in scheduled admissions as a result of care management for the newly insured.

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